



TOWN OF NEWTOWN PROPERTY ASSESSMENT APPEAL FORM

March 2017 Session

(Deadline to file is February 20th (postmarked) or hand delivered by Feb. 20th)

(Forms may be emailed to: penny.mudgett@newtown-ct.gov or faxed to (203) 270-4243 by Feb 20th)

APPEAL TO THE BOARD

DATE OF APPLICATION: _____

Property owner(s) _____

Name of signer (if signer is different from owner) _____

Position of signer (if signer is different from owner) _____

Property owner will be represented by: self _____ agent _____

(If designated agent, complete authorization form on reverse side)

Name of Person & address to which all notices and correspondence should be sent (list one address only):

Name _____

Street _____

City, State, Zip Code _____

Description of the property being appealed (i.e.: location of real estate, year/make model/CT registration for motor vehicle) _____

For Grand List of October 1, 2016 Real Estate __ Personal Property __ 15 Motor Vehicle Sup. __

Reason for the Appeal: _____

Appellant's estimate of the value of the property being appealed: _____

Signature of owner or agent (See reverse for agent authorization form) must be complete.

Day time telephone # _____ Night time telephone # _____

PLEASE NOTE THAT THE ABOVE FORM MUST BE COMPLETED IN ITS ENTIRETY. PROPERTY OWNERS OWNING MORE THAN ONE PROPERTY OR VEHICLE MUST FILE A SEPARATE FORM FOR EACH ACCOUNT APPEALED. PLEASE TYPE OR PRINT LEGIBLY.

(Board of Assessment Appeals use only)

NOTICE OF APPEAL HEARING:

DATE: _____

TIME: _____

PLACE: **3 Primrose Street, Newtown, CT.**

See reverse for agent certification: (OVER)

AGENT'S CERTIFICATION

DATE: _____

TO WHOM IT MAY CONCERN:

I, _____ being the legal owner of property located
at: _____ hereby authorize _____
to act as my agent in all matters before the Board of Assessment Appeals of the Town of
Newtown for the assessment year commencing October 1, 2016.

(Signed) _____

(Printed) _____

PLEASE RETURN FORMS TO:

Board of Assessment Appeals
C/O Assessor's Office
3 Primrose Street
Newtown, CT 06470